

AGENDA ITEM: Discussion on Regional Priorities and System Building

BACKGROUND: The funding plan process resulted in a systematic approach to determining the

strategies that will be implemented in the Cochise region's service delivery

network for children and families. The chosen strategies link to past accomplishments and continue to: build on each other, support the State Board's priority roles; impact school readiness indicators at a local and state level; and influence the elements needed to create a sustainable early learning system. In the region, access to early care and education, family support and

oral health are the primary focus areas.

The recognized need to continue building community awareness and support

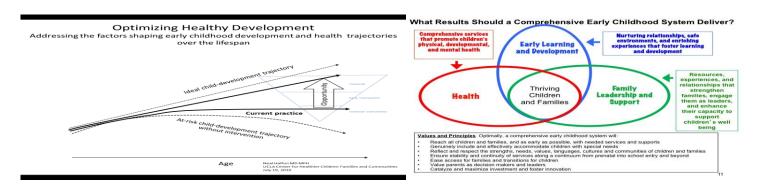
collaborative efforts are integrated into the structure.

RECOMMENDATION: The Regional Director presents this as informational purposes only and to

engage feedback from the Council on different ways to incorporate and build consensus within the County with key stakeholders, elected officials, business leaders, K-12 education, higher education, non-profits and others – to truly

build the early childhood system within Cochise County.

Based on the data and prioritized needs, the Cochise Regional Partnership Council designed a strategic plan that builds on coordination, access to and high quality child care for the children of Cochise County. The Cochise Regional Partnership Council has identified three primary areas of focus: Home visitation, Quality First and Oral Health.



Voluntary, home-based programs, also known as home visits, match parents with trained professionals to provide information and support during pregnancy and throughout their child's first three years. By helping parents learn how to care for their children and themselves, families reap the benefits: children are safer, healthier, better prepared to learn and more likely to become successful adults.

The Cochise Regional Partnership Council wanted to ensure the early childhood system is available beyond birth to age three and thus built the infrastructure for quality and access to quality environments. The Quality First program incorporates professional development, child care health consultation, coaching services, program standards and quality assurance and improvement efforts. Connecting home visiting efforts and high quality child care, particularly those focused on children's well-being and healthy development, with other child and family services will ensure that young children and parents have the comprehensive support they need.

The Cochise Regional Partnership Council has incorporated an oral health strategy; tooth decay is the single most common chronic infectious disease of childhood, five times more common than asthma. Oral disease is progressive and cumulative and if left untreated can lead to needless pain and suffering; difficulty in speaking, chewing and swallowing; missed school days, increased cost of care and at a greater risk for other systemic health problems due to poor nutrition. Connections are emerging between the condition of the mouth and diabetes, heart disease, and preterm, low-weight births. According to the 2008 and 2010 Needs and Assets report oral health has been neglected in Cochise County, and proves to be a huge issue for children and families, within the Cochise Region.

The strategies presented in this funding plan focus on building and sustaining capacity and infrastructure in order to engage in the ongoing work of community change and building the early childhood system. This will ensure children have the access to quality health care and the awareness of early childhood development and health for children birth to age five in Cochise County.

Phases, Timelines and Planning Tool:

Phase I – Pre Assessment	Phase II - Defining the Issues	Phase III – Prepare Action Planning	Phase IV - Initial Action Plan
January/February 2013	February-March/April 2013	May – June/July	Late Summer/Early Fall 2013
Review Council Strategic Direction; Talk about system building concepts; Link strategies to other systems locally, funding mechanisms (public private dollars, engagement of grantees, service providers, and identify community partners; Possible questions to assist in this work: 1. Is there an area of system building we have not considered or discussed; 2. Are there other linkages between the Council and community activities; 3. What approach do you want to take; 4. Are other groups working on part of the system for children 0-5; 5. Are there additional resources that can/should be utilized; 6. How will we evaluate success; 7. How to invite others to the table? Note: Indicator discussions will be included.	The "Who" will be determined by the approach and the work done in Phase I; Possible tool to come out of Phase I discussions: Regional (possibly cross regional) asset map or inventor of assets/individuals/groups around the priority area – asset map will be designed to continually broaden the conversation; Possible questions to assist in this work: 1. Who are the movers/shakers; 2. Who to contact in the priority area and geographic area that would be most successful in getting other involved; 3. Who should be involved to ensure culture considerations are addressed; 4. When meeting with possible group members; what is the benefit they will gain by being involved in the system building work? Note: Indicator discussions will be included.	 Action Planning will provide: An understanding of the community's perception of the system, the approach and potential solutions/next steps; Assure inclusive and integrated participation across community sectors in the planning process; Build consensus on what can and should be done based on the community's unique assets and needs; Specify concrete ways in which members of the group can take action and why. June: Build consensus on system development priority: Convene a planning group; Provide needs and assets within the county; Build consensus (possible mini town hall session. July: Develop a framework for action: Review and analyze current reality with group; Establish/confirm group commitment/vision; Outline action that could be done by one group; Develop calendar and assignments. 	This phase produces an initial action plan that may include only preliminary steps to moving toward system building – Consider: Begin with steps that are achievable over a relatively short time frame (3 months); Develop action steps with specific time frames and identify those responsible for completion; Build upon success by developing and action plan for other identified steps; Identify tracking tools or indicators that will provide milestones for each phase and phases; Provide flexible tools that allow for appropriate regional timelines that account for the complexity of the system in Cochise County.

Notes, Ideas, Comments and Suggestions – (Please give to Sarah at the end of the meeting) – Thank you!